Olmstead-Related Legislation:

SECOND YEAR OF 2005-06 LEGISLATIVE SESSION (Revised September 2006)

The following bills are two-year bills introduced in the first year of session, as well as bills introduced at the beginning of this legislative year. The deadline for bill introduction was February 24, 2006.

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California Department of Aging

AB 1928 (Berg): Area Agencies on Aging and Independent Living Centers:

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AB 1929 (Berg): Area Agencies on Aging: Electronic Transfer of Funds

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AB 1478 (Frommer): Developmental Services: Autism Spectrum

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IHHS and Related

AB 1326 (Vargas): In Home Supportive Services

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Long Term Care

AB 10 (Daucher): Inappropriate Placement of Persons with Disabilities

AB 1643 (Jones): Long Term Care Insurance

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AB 813 (Nunez): Medi-Cal: Emergency Drug Benefits

AB 1258 (Daucher): Adult Day Health Care

AB 1930 (Berg): Medi-Cal Drug Benefits: Long-Term Care Facilities

AB 2607 (De La Torre): Medi-Cal: managed care: persons with disabilities

AB 2968 (Leno): Medi-Cal: Community Living Support Benefit

AB 2979 (Richman): Medi-Cal Managed Care

AB 3019 (Daucher): Community Options and Assessment Protocol

Tax Credits and other Monetary Issues

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AB 1844 (Chavez): Minimum Wage Increase

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Conservatorship

SB 1116 (Scott): Conservatorships

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SB 481 (Chesbro): Self-Directed Services Program

SB 1270 (Chesbro): Development Services: Service Methods SB 1283 (Chesbro): Area Boards on Developmental Disabilities

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SB 1660 (Romero): In Home Supportive Services: Provider Wage and

Benefit Increases

Long Term Care

SB 526 (Alquist): Long Term Health Care

SB 855 (Poochigian): Special Access: Liability

SB 1212 (Torlakson): Continuing Care Retirement Communities: Advisory

Committee Memberships and Provider Financial Requirements

Medi-Cal

SB 642 (Chesbro): Adult Day Health Care Program

SB 912 (Ducheny): Repeal of 5% Rate Cut

SB 1233 (Perata): Medi-Cal: Prescription Drug Benefit

SB 1755 (Chesbro): Medi-Cal: Adult Day Health Care Services

ASSEMBLY

Alzheimer's

• AB1861 (Horton): Aging Programs

Existing law contains requirements for a contractor operating an Alzheimer's day care resource center and for a contractor providing services under the Linkages Program. This bill would, provide that, in selecting these contractors, an area agency on aging would be required to use the competitive bidding process, except that after the initial contract with that contractor is entered into, the area agency on aging would be authorized to continue to contract with that contractor without using the competitive bidding process, unless the area agency on aging deems it in the best interest of the state to use the competitive bidding process. This bill would provide that if an area agency on aging continues a contract pursuant to the above provisions without using the competitive bidding process, the area agency on aging shall disclose this fact to the public at its annual public hearing.

Status:

Held in Assembly APPROPRIATIONS

California Department of Aging

AB 1928 (Berg): Area Agencies on Aging and Independent Living Centers: Funding

This bill would continuously appropriate from the Federal Trust Fund, in the absence of enactment of the annual Budget Act by July 1 of a fiscal year, (1) to the California Department of Aging, the amount of federal funds contained in the Federal Trust Fund that is necessary to pay area agencies on aging for the administration of programs under their jurisdiction, and (2) to the Department of Rehabilitation, the amount of federal funds contained in the Federal Trust Fund that is necessary to pay independent living centers for the administration of programs under their jurisdiction, pending enactment of the Budget Act.

Status:

Held in Assembly APPROPRIATIONS

• <u>AB 1929 (Berg):</u> Area Agencies on Aging: Electronic Transfer of Funds

Existing law declares that is the mission of the California Department of Aging to provide leadership to the area agencies on aging in developing systems of home and community-based services to maintain individuals in their own homes or in the least restrictive homelike environments and distributes funds to the area agencies on aging. This bill would require the department, in consultation with the Controller, by August 1, 2007, to develop and implement a procedure for the electronic transfer of funds from the department to the area agencies on aging, for the programs and services administered by the area agencies on aging.

Status:

To enrollment. (Ayes 78. Noes 0.)

• <u>AB 2014 (Berg):</u> Programs for the Seniors and Independent Adults

Existing law provides various services to persons with disabilities and seniors, which are overseen by the State Department of Social Services, including the In-Home Supportive Services Program and the development of guidelines in the implementation of local adult protective services

programs, to assist them in living in the community instead of being placed in a facility. Existing law also vests in the Department of Rehabilitation the responsibility and authority for the encouragement of the planning, development, and funding of independent living centers. Existing law also establishes various programs under the jurisdiction of the California Department of Aging. This bill would rename the California Department of Aging the California Department of Adult and Aging Services and would transfer responsibility for specified programs to the California Department of Adult and Aging Services.

Status:

Held in Senate HUMAN SERVICES Committee

Conservatorship

• <u>AB 1363 (Jones):</u> Omnibus Conservatorship and Guardianship Reform Act of 2006

This bill would enact the Omnibus Conservatorship and Guardianship Reform Act of 2006. Commencing January 1, 2008 the act would require professional conservators and guardians to be licensed and would prohibit a court from appointing nonlicensed professional conservators and guardians. The bill would establish qualifications, including educational and training criteria for applicants for licensure. The bill would require the Judicial Council to among other things, adopt specified rules of court relating to conservatorships and guardianships and to enact educational programs for nonlicensed conservators and guardians. The bill would also require the Judicial Council to establish qualifications and educational classes for any court-employed staff attorney, to require educational classes for these attorneys, probate judges and public guardians, to establish conservatorship accountability measures, and to develop a form to provide notice regarding free assistance provided by the court to conservators. The bill would require the review of conservatorships at a noticed hearing and impose new requirements governing accounting. As well, the bill also specifies the circumstances under which a guardian or conservator that is a trust company is required to obtain authorization of a court prior to exercising its powers.

Status:

To enrollment.

Death with Dignity

• AB 651 (Berg): California Compassionate Choices Act

Existing law authorizes an adult to give an individual health care instruction and to appoint an attorney to make health care decisions for that individual in the event of his or her incapacity pursuant to a power of attorney for health care. This bill would enact the California Compassionate Choices Act, which would authorize an adult who meets certain qualifications, and who has been determined by his or her attending physician to be suffering from a terminal disease, as defined, to make a request for medication prescribed pursuant to this bill to provide comfort with an assurance of peaceful dying if suffering becomes unbearable. The bill would establish procedures for making these requests. This bill would provide immunity from civil or criminal liability or professional disciplinary action for participating in good faith compliance with the act. This bill would require the Department of Health Services (DHS) to adopt regulations regarding the collection of information to determine the use of and compliance with the act, and would require the department to annually review a sample of certain records and make a statistical report of the information collected.

Status:

Held in Senate JUDICIARY Committee

Developmental Disability Issues

• AB 1379 (Lieber): Agnews Developmental Center: Closure

This bill requires that Agnews Developmental Center property be subject to certain conditions. Specifically, this bill prohibits classification of property at Agnews as surplus property absent express legislative authorization. The bill establishes the Agnews Developmental Center Campus Advisory Group to provide the Legislature with recommendations regarding the disposition of land at Agnews and requires the group to report recommendations to the Legislature by June 30, 2006. The bill requires the recommendations preserve the land, or its value for people with developmental disabilities under the Lanterman Act.

Status:

Failed Passage pursuant to Art. IV, Sec. 10(c) of the Constitution.

• <u>AB 1478 (Frommer)</u>: Developmental Services: Autism Spectrum Disorders

Existing law, the Lanterman Developmental Disabilities Services Act, establishes the State Department of Developmental Services and sets forth its duties and responsibilities, including, but not limited to, the administration and oversight of the state developmental centers and programs relating to persons with developmental disabilities. Existing law requires the department to allocate funds to private nonprofit regional centers for the provision of community services and support for persons with developmental disabilities and their families. This bill would require the department, in consultation with specified state department, to develop guidelines for the treatment of autism spectrum disorders and to disseminate the information to parents.

Status:

To enrollment.

• AB 2513 (Pavley): Pupils: Autism: Training and Information

This bill would require the Superintendent of Public Instruction to convene, with input from the University of California, the California State University, relevant fiscal and policy committees of the Legislature, the Legislative Blue Ribbon Commission on Autism, the Department of Developmental Services (DDS) and other appropriate entities, an advisory committee, as specified. The bill would require the advisory committee to develop specified recommendations that would identify the means by which public and nonpublic schools, including charter schools, may better serve children with autism. The bill would declare that the recommendations of the advisory committee are not to be construed or applied as state imposed standards or binding on any individualized education program (IEP) team, special education official, or child with autism. The bill also would declare that its provisions do not prescribe or define an appropriate educational or habilitative program for a child with autism. The bill would declare that the recommendations developed by the advisory committee do not govern the services and supports provided pursuant to the Lanterman Developmental Disabilities Services Act. The bill also would declare that its provisions do not prescribe or define an appropriate individualized family service plan or

an individual program plan, as specified, for a child with autism. The bill would require, on or before November 1, 2007, the advisory committee to submit its recommendations to the Legislature and to the Governor.

Status:

To enrollment. (Ayes 75. Noes 4.)

IHHS and related issues

• AB 1326 (Vargas): In Home Supportive Services- Health Benefits

This bill would authorize a recipient who receives In Home Supportive Services through a Long Term Care Integration Pilot Project/Acute and Long Term Care Integration Project to select his or her own service provider, subject to program requirements. Existing law requires the Department of Social Services (DSS) to adopt implementing regulations by June 30, 2006, with the input of designated public and private entities. This bill would extend the date by which DSS is required to adopt the implementing regulations to December 31, 2006.

Status:

To inactive file.

• <u>AB 2486 (Ridley-Thomas)</u>: In-home Supportive Services: Criminal Background Checks

Existing law permits services to be provided under the IHSS program either through the employment of individual providers, a contract between the county and an entity for the provision of services, the creation by the county of a public authority, or a contract between the county and a nonprofit consortium. Furthermore, under existing law, the functions of a nonprofit consortium contracting with the county, or a public authority established for this purpose, include investigating the qualifications and background of potential personnel. This bill would authorize the investigation of potential personnel by a nonprofit consortium or public authority to include criminal background checks conducted by the Department of Justice or, in certain circumstances, by an investigative consumer reporting agency, upon the request of the nonprofit consortium or public authority. The bill would prohibit a fee from being charged to a provider, potential personnel, or a recipient to cover any cost related to administering requirements with

respect to an investigation, or the costs to certain entities for processing a criminal background check, under these provisions.

Status:

To enrollment. (Ayes 65. Noes 14.

• <u>AB 2494 (Ridley-Thomas)</u>: In-home Supportive Services: Provider Training

This bill would authorize an IHSS provider to receive wages for up to 6 hours of prescribed training per calendar year if specified conditions are met. This bill would limit its implementation to the extent that funds are appropriated for its purposes, and require the Secretary of California Health and Human Services to actively pursue available federal funding for training authorized by the bill. The bill would prohibit the training authorized under the bill from counting against assessed hours for a recipient of in home supportive services. It would allow training who provides transitional training for another provider of in home supportive services, in order to meet the individual needs of a consumer who is changing providers. This bill would authorize an entity that provides instruction in a field identified in the bill to enter into a memorandum of understanding with the representative or employer of record of IHSS providers, for the purpose of providing the training authorized by the bill.

Status:

To enrollment. (Ayes 56. Noes 22)

• AB 2536 (Montanez): Minimum Wage

Existing law, with certain exceptions, establishes 8 hours as a day's work and a 40-hour workweek, and requires payment of prescribed overtime compensation for additional hours worked. A violation of this provision is a misdemeanor. This bill would provide that these overtime compensation requirements should apply, with certain exceptions, to a personal attendant. This bill would entitle a household worker, as defined, in any action to recover unlawfully withheld wages or unpaid overtime compensation under any of these provisions, to recover liquidated damages in an amount equal to the unlawfully withheld wages or unpaid overtime compensation plus interest on that amount.

Status:

To enrollment. (Ayes 47. Noes 31)

• <u>AB 3048 (Dymally)</u>: Public Social Services: Assistance During Health- Related and Alternative Site Appointments

Under existing law, In Home Supportive Services (IHSS) are defined to include accompaniment of a service recipient by a provider when needed during necessary travel to health-related appointments or to alternative resource sites. This bill would define the scope of accompaniment and travel to a health-related appointment for purposes of these provisions. Existing law requires the Department of Social Services (DSS), in consultation with counties, to develop a standardized curriculum, training materials, and work aids, and operate an ongoing statewide training program, on specified matters related to the provision of IHSS. This bill would require DSS to develop a standardized curriculum and training materials, and to provide statewide training, on the components of the medical accompaniment task.

Status:

To enrollment. (Ayes 54. Noes 25.)

Long Term Care

• <u>AB 10 (Daucher):</u> Inappropriate Placement of Persons with Disabilities

This bill would require the Department of Health Services (DHS) to select 3 voluntary pilot programs that utilize a documentation tool, if available, to be allowed to charge a fee for long-term care navigation services. The fee would be voluntary and would be charged to non-Medi-Cal seniors and persons with disabilities 18 years of age or older who are at risk for nursing home placement and who would like long-term care navigation services. The bill would declare that, upon appropriation by the Legislature, the fee revenue would serve as matching federal targeted-case management dollars to provide funding for Medi-Cal eligible seniors and persons with disabilities at risk of nursing home placement to receive the same long-term care navigation services as persons who utilize the private pay method. This bill would require DHS, 24 months after commencement of the pilot

programs, to evaluate the pilot programs, and submit this evaluation to the appropriate legislative committees. It would also require the department to seek a federal waiver, to be drafted by a 3rd party approved by DHS. The bill would provide that it would be implemented only if the federal waiver is approved and DHS determines that implementation of the pilot programs are cost-neutral.

Status:

Held in Senate APPROPRIATIONS Committee

• AB 1643 (Jones): PERS Long Term Care Insurance

The Public Employees' Long-Term Care Act provides long term care insurance coverage for members of CalPERS. The coverage of the Act has been expanded over time to include persons covered by various retirement systems and to extend eligibility to parents, siblings, and parents of siblings of covered individuals. However, persons with disabilities who do not meet the underwriting criteria cannot get coverage in PERS LTC Insurance. This bill requires the California Institute on Human Services at Sonoma State University, with assistance from the Board of Administration of the Public Employees' Retirement System, to contract with an organization experienced in disability policy and demographic research to conduct a study concerning long-term care, as specified, and submit a report on the study to the Legislature by December 31, 2008. This report shall include:

- Expected costs of providing LTC Insurance coverage without underwriting criteria;
- The feasibility and desirability of various options including, charging increased premiums for enrollees not subject to underwriting and imposing increased waiting periods for those not subject to underwriting;
- A proposal for a LTC Insurance program that would maintain the financial stability of the plan while balancing the need to cover the maximum number of individuals with the fewest restrictions on coverage; and
- Other options for ensuring that persons now excluded from the longterm care insurance plan are able to obtain long-term services when needed and are not discouraged from seeking employment in order to continue receiving public benefits.

Status:

To enrollment

Medi-Cal

• AB 813 (Nunez): Medi-Cal: Emergency Drug Benefits

Existing law requires the State Department of Health services, through February 15, 2006, and only to the extent that funds are appropriated for this purpose, to provide drug benefits to a Medicare-eligible person who is also eligible for Medi-Cal prescription drug benefits and who is not able to obtain drug benefits from his or her prescription drug plan under the Medicare Program. Existing law allows the Governor, after that date, and upon notice to the Joint Legislative Budget Committee, to extend coverage for those drug benefits for coverage periods of up to 30 days each, but in no event beyond May 16, 2006.

This bill would require the department, beginning May 17, 2006, and ending January 31, 2007, and only to the extent that funds are appropriated for this purpose, to provide emergency drug benefits to a Medicare-eligible person who is also eligible for Medi-Cal prescription drug benefits but is unable to obtain drug benefits from his or her Medicare Drug Plan only when one or more of certain conditions are met. The bill would give pharmacies specified duties in this regard, including making a specified certification under penalty of perjury.

Status:

Chaptered by Secretary of State - Chapter 24, Statutes of 2006.

• AB 1258 (Daucher, Administration Sponsored): Adult Day Health Care

This bill authorizes DHS to revise its State Plan or develop a waiver to bring ADHC services under the Medi-Cal program into compliance with federal laws and regulations. In addition, this bill specifies some of the terms of the State Plan Amendment (SPA) or waiver, including the restructuring of the interagency agreement with CDA, clarification and expansion of certification requirements, and a cleanup of the ADHC licensing statutes. The bill includes a restructure of the ADHC program under a SPA or waiver, including per service billing and reimbursement in place of the current bundled billing, the establishment of new medical

necessity criteria that must be met for prior authorization of ADHC services, and the expansion of audit procedures to ensure compliance with licensing and certification requirements.

Status:

Died pursuant to Art. IV, Sec. 10(c) of the Constitution.

• <u>AB 1930 (Berg)</u>: Medi-Cal: Drug Benefits: Long-Term Care Facilities

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Services and under which qualified lowincome persons receive health care benefits, including, for certain beneficiaries, prescription drug benefits. The Medi-Cal program is, in part, governed and funded by federal Medicaid provisions. This bill would require the department to provide coverage, including retroactive coverage, for drug benefits during any period in which drugs are provided to a resident of a long-term care facility if that resident applies for, and is determined to be eligible for, full benefits under the Medi-Cal program for the period in which the drugs are provided. The bill would require the department to provide this coverage regardless of whether federal financial participation is available. The bill would specify that these provisions shall not apply if the resident of the long-term care facility is enrolled in, and has active drug benefits under, a prescription drug plan under the Medicare Program for the period in which the drugs are provided, has disenrolled from such a program, or has a policy of insurance that provides prescription drug coverage for the relevant period.

Status:

Held in Assembly APPROPRIATIONS committee

• <u>AB 2607 (De La Torre)</u>: Medi-Cal: Managed Care: Persons with Disabilities

This bill would enact the Mandatory Medi-Cal Managed Care Pilot Program. Under this program, until July 31, 2012, and subject to the enactment of subsequent legislation, the department would be authorized to require, in up to 2 counties, on a pilot basis, that seniors and persons with disabilities who are not expressly excluded from enrollment be assigned as mandatory enrollees to new or existing Medi-Cal managed

care health plans. The bill would require the Department of Health Services, by March 1, 2007, to submit to the appropriate policy and fiscal committees of the Legislature a proposed implementation plan containing specified elements and prepared in consultation with a stakeholder committee, and to take certain other actions relating to the development of the pilot program. The bill would impose various requirements on managed care plans participating in the program. The bill would require the department to seek federal approval for the program, and to conduct an annual evaluation of the program.

Status:

Held in Senate APPROPRIATIONS Committee

• AB 2968 (Leno): Medi-Cal: Community Living Support Benefit

This bill would require the Department of Health Services to develop and implement a program to provide a community-living support benefit to eligible Medi-Cal beneficiaries. It would require the department to submit any federal documentation that is necessary to provide this benefit, and to implement the benefit only to the extent that federal financial participation is available. The bill would require that the benefit include reimbursement for an array of health-related and psychosocial services provided or coordinated at community-based housing sites, and access to certain community-living support services provided or coordinated at those sites. Eligibility for the benefit would be limited to persons who are eligible for Medi-Cal, who are residents of San Francisco who would otherwise be homeless, living in shelters, or institutionalized, and who meet at least one of 2 other criteria. The bill would condition implementation of these provisions upon adoption of a resolution by the board of supervisors of the City and County of San Francisco providing for county funds for specified purposes related to the program.

Status:

To enrollment. (Ayes 78. Noes 1)

• AB 2979 (Richman): Medi-Cal Managed Care

This bill would require the Department of Health Services, in consultation with stakeholders, to develop a statewide education and outreach program

specific to the needs of seniors and persons with disabilities in an effort to promote a greater understanding of, and increased enrollment in, Medi-Cal managed care. This bill would also, until January 1, 2013, authorize the department to implement the Medicare HMO Wraparound pilot project for eligible individuals in selected counties to provide a coordinated system of care and benefits for individuals who are eligible for both the federal Medicare Program and the Medi-Cal program and who are receiving Medicare services and Medi-Cal HMO Wraparound services.

Status:

Held in Senate APPROPRIATIONS Committee

AB 3019 (Daucher): Community Options and Assessment Protocol

This bill would require the California Health and Human Services Agency, in consultation with specified entities, to develop and test the Community Options and Assessment Protocol (COAP), to minimize duplication and redundancy of multiple assessments for home- and community-based services and connect consumers under the Medi-Cal program. The bill would require the agency to establish goals, as specified, to be achieved by the COAP. This bill would authorize the agency to enter into competitively bid contracts with technical experts to aid in the development of the COAP, as specified, and to complete the Request for Proposal by January 31, 2007. This bill would appropriate \$593,000 from the General Fund and \$594,000 from the Federal Trust Fund to the agency, to fund a staff position for 2 years and a technical expert contractor to develop deliverables related to the requirements of the COAP.

Status:

Held in Senate APPROPRIATIONS Committee

Tax Credits and other Monetary Issues

• AB 298 (Berg): Personal Income Tax: Caregivers Tax Credit

The Personal Income Tax Law allows a credit for taxable years beginning on or after January 1, 2000, and before January 1, 2005, in an amount equal to \$500 in caregiver tax credits. This bill extends the existing \$500 tax credit to 2011.

Status:

Held in Senate REVENUE AND TAXATION Committee

• AB 1844 (Chavez): Minimum wage increase

Under existing law, by statute, the minimum wage for all industries shall be not less than \$5.75 per hour on and after March 1, 1998. Also under existing law, the Industrial Welfare Commission is authorized to set a higher minimum wage in accordance with a prescribed procedure that includes the selection of wage boards to consider and make recommendations regarding wage issues. The current minimum wage for all industries, as established by the commission, is \$6.75 per hour on and after January 1, 2002. This bill would increase the minimum wage to \$7.25 per hour, effective on and after July 1, 2007, and would further increase the minimum wage to \$7.75 per hour, effective on and after July 1, 2008. In addition, this bill would provide for an automatic adjustment of the minimum wage on January 1 of each year thereafter, calculated by multiplying the minimum wage by the previous year's rate of inflation, as specified.

Status:

Held in Assembly APPROPRIATIONS Committee

AB 1847 (Leslie): Taxation: Tax Credit: Access to Disabled Individuals

The Personal Income Tax Law and the Corporation Tax Law, in the case of a taxpayer that is an eligible small business, as defined, authorize a credit against the taxes imposed by those laws for specified expenditures incurred by the taxpayer to provide access to disabled individuals in accordance with federal income tax laws, but, unlike the federal income tax laws, limit the amount of that credit to an amount equal to 50%, but not to exceed \$250, of the eligible access expenditures, incurred during the taxable year. This bill would modify those provisions beginning on or after January 1, 2006, and before January 1, 2012, to increase the amount of the credit, in full conformity with the federal income tax laws, to an amount equal to 25%, but not to exceed \$10,250, of the eligible access expenditures in excess of \$250 incurred during the taxable year. This bill would also, beginning on or after January 1, 2012, modify those provisions

to limit the amount of that credit to an amount equal to 50%, but not to exceed \$250, of the eligible access expenditures, incurred during the taxable year.

Status:

Held in Assembly APPROPRIATIONS Committee

AB 2536 (Montanez): Employment: Minimum Wage and Overtime Compensation

Existing law, with certain exceptions, establishes 8 hours as a day's work and a 40-hour workweek, and requires payment of prescribed overtime compensation for additional hours worked. A violation of this provision is a misdemeanor. This bill would entitle a household worker or personal attendant, as defined, in any action to recover unlawfully withheld wages or unpaid overtime compensation under any of these provisions, to recover liquidated damages in an amount equal to the unlawfully withheld wages or unpaid overtime compensation plus interest on that amount.

Status:

To enrollment. (Ayes 47. Noes 31)

SENATE

Conservatorship

• SB 1116 (Scott): Conservatorships

Existing law generally authorizes a guardian or conservator to fix the residence of a conservatee or ward within the state without permission of the court, by selecting the least restrictive appropriate setting, as specified, that is in the best interests of the conservatee. This bill would revise and recast this provision and presume that the least restrictive appropriate residence for the conservatee is the personal residence of that conservatee, except if proven otherwise by preponderance of the evidence. The bill would exempt from these provisions conservatees with developmental disabilities for whom the Director of the Department of Developmental Disabilities or a regional center for the developmentally disabled acts as a conservator, as specified. Existing law provides that

sales of real or personal property of the estate of a conservatee are subject to authorization, confirmation, or direction of the court, except as otherwise provided and except for the sale of a conservatee's personal residence. In seeking authorization to sell a conservatee's present or former personal residence, the conservator is required to notify the court that the personal residence is proposed to be sold and that the conservator has discussed the proposed sale with the conservatee, among other requirements. This bill would revise the provisions for the proposed sale of the personal residence of a conservatee and require a conservator to publish and post a notice of sale, reappraisal for sale, minimum offer price, and other information related to the sale of the personal residence, as specified. This bill would delete restrictions regarding the sale of the personal residence of the conservatee related to contracts with and compensation of agents, brokers, and auctioneers, and restrictions regarding the sale of personal property. Under existing law, the court, in its discretion, may make an order granting a conservator one or more powers, as specified, for the advantage, benefit, and best interest of the estate of the conservatee. These powers include the sale of real property of the estate. This bill would additionally require that the sale of the personal residence of a conservatee, including the terms of sale, price, and commissions to be paid from the estate, to be in the best interest of the conservatee, that the sale of that personal residence shall comply with requirements for appraisal and minimum offer price, and other conditions, as specified.

Status:

To enrollment

Developmental Issues

• SB 481 (Chesbro): Self-Directed Services Program

This bill would establish the Self-Directed Services Program, which would expand the self-determination pilot projects to every regional center catchment area, consistent with federal approval of a self-directed waiver, and provided the participants meet certain eligibility requirements. It would also require the Department of Developmental Services to develop, revise, and maintain regulations implementing these requirements, and would permit the adoption by the department of emergency regulations to implement these provisions.

Status:

Held in Assembly HUMAN SERVICES Committee

• <u>SB 1270 (Chesbro)</u>: Development Services: Service Methods: Study

This bill would require the Department of Developmental Services (DDS) to provide to regional centers, and make available on the Internet, specified information related to employment options for persons with developmental disabilities. This bill would also require the department, in consultation with regional centers, to assess the need and develop a plan for the training of regional center staff on employment issues faced by persons with a developmental disability. Existing law provides for the Developmental Disabilities Program Development Fund to provide resources needed to initiate new programs that are consistent with approved priorities for program development in the state plan. This bill would instead provide that the fund shall provide resources needed to initiate new programs and to expand or convert existing programs, and would specify that all program development funds shall promote services and supports that increase opportunities for self-determination and independence of persons with developmental disabilities, as specified. This bill would also require the State Council on Developmental Disabilities, with the support of DDS, to convene a workgroup, as specified, that will develop alternative and expanded options for nonresidential services and supports for persons with developmental disabilities. The bill would require the workgroup to develop and submit their recommendation to the Governor and appropriate committees of the Legislature by May 1, 2007, and incorporated into the state plan, thereafter.

Status:

To enrollment.

• SB 1283 (Chesbro): Area Boards on Developmental Disabilities

Existing law, the Lanterman Developmental Disabilities Services Act, requires the Department of Developmental Services (DDS) to allocate funds to private nonprofit regional centers for the provision of community services and support for persons with developmental disabilities and their families, and sets forth the duties of the regional centers, including, but not

limited to, development of individual program plans and the monitoring of services. This bill would require the Governor to appoint a deputy director for area board operations upon the recommendation of the executive director of the State Council on Developmental Disabilities rather than upon recommendation of the council. The bill would require the Governor to appoint to the council the executive director of the California advocacy agency under federal law, rather than a member of that agency's board of directors. The bill would require the council to request information from regional centers regarding available and needed services and supports at least once every 5 years rather than every 3 years, would require the request to be made in conjunction with the area boards, would specify the information to be considered in making the needs assessment, and would require the methodology for collection and the display format of the information to be jointly determined by the council and the Association of Regional Center Agencies. The bill would require that the assessment be updated annually, be provided to DDS and the Legislature, and be made available to the public.

Status:

To enrollment.

IHHS

• <u>SB 1435 (Ortiz)</u>: IHHS Pilot-Project: Eligibility: Purchase of Service

This bill would require the Department of Social Services to establish a 4 year pilot project that would authorize certain individuals who are not financially eligible to receive in-home supportive services, to purchase those services. The bill would require the pilot project to be conducted in 3 counties that consent to participate, and would require the department to develop eligibility guidelines for individuals wishing to purchase services under the pilot project, and to consult informally with designated entities and stakeholders. This bill would require a participating county to evaluate the pilot project in accordance with criteria set forth in the bill. The bill would require the department to ensure that the pilot project is conducted so as to secure maximum federal financial participation, including, if necessary, applying for a federal waiver. This bill would provide that participating counties shall not be responsible for a share of cost for the administration of, or services provided under, the bill. The bill would prohibit a person

providing in-home supportive services pursuant to the bill from being paid more in wages and benefits than if the person were providing those services to an individual under the In Home Supportive Services program, and would prohibit the eligibility assessment of an applicant under the In Home Supportive Services program from being delayed by the eligibility assessment of a person desiring services under the bill.

Status:

Enrolled too Governor at 4 p.m.

• <u>SB 1660 (Romero)</u>: In Home Supportive Services: Provider Wage and Benefit Increases

This bill would eliminate the condition necessary for an increase in the nonfederal share of provider wages and benefits to become operative, for the 2006-07 fiscal year and each fiscal year thereafter.

Status:

To enrollment.

Long Term Care

• SB 526 (Alquist): Long Term Health Care

This bill would require the State Department of Health Services to establish dedicated complaint response units in each district office of the Licensing and Certification Division of the Department of Health Services (DHS) by January 1, 2007 following a study of unanticipated costs, require DHS to issue a Class "A" citation when a nursing home resident is sexually assaulted by an employee of the facility, add to the list of resident rights for long-term health care facilities, including changes to requirements regarding transfer and discharge of patients, create requirements for skilled nursing facilities for the admission of patients covered by the Medi-Cal program, and require nursing home operators to document labor costs by submitting payroll records to DHS on a quarterly basis.

Status:

Held in Senate Health Committee

• SB 855 (Poochigian): Special Access: Liability

This bill would impose pre-litigation procedural requirements upon the filing of any claim under the state's civil rights and equal access to public or housing accommodation laws, including claims of violations of the Americans with Disabilities Act in state-owned facilities.

Status:

Returned to Secretary of Senate pursuant to Joint Rule 56.

 SB 1212 (Torlakson): Continuing Care Retirement Communities: Advisory Committee Memberships and Provider Financial Requirements

Existing law provides for the regulation by the Department of Social Services of activities relating to continuing care contracts that govern care provided to an elderly resident in a continuing care retirement community for the duration of the resident's life or a term in excess of one year. Existing law establishes that the Continuing Care Advisory Committee of the department shall act in an advisory capacity to the department on matters relating to continuing care contracts. This bill would revise the membership and administrative operating procedures of the committee. This bill would also reduce the percentages of each depositor's applicable entrance fee required to be placed into escrow by an applicant from 20% to 10%.

Status:

Enrolled. To Governor at 4 p.m.

Medi-Cal

• SB 642 (Chesbro): Adult Day Health Care Program

This bill makes various changes to the Adult Day Health Care (ADHC) Program and requires the Department of Health Services (DHS) to take all appropriate action to obtain approval for a State Plan Amendment that would conform the ADHC program to requirements of federal law and include specific requirements. The bill would provide that no provision of the ADHC state plan amendment shall be implemented unless and until DHS has obtained full approval for that amendment from the federal

Centers for Medicare and Medicaid Services, and the plan can be implemented by DHS.

Status:

Died on file

• SB 912 (Ducheny): Medi-Cal: Provider Reimbursement

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Services and under which qualified low-income persons receive health care benefits. Existing law requires the Director of Health Services, until January 1, 2007, to reduce by 5% Medi-Cal provider payments for Medi-Cal program services for dates of service on and after January 1, 2004. However, existing law makes this reduction inapplicable to Medi-Cal program services provided between January 1, 2004, and December 31, 2005. Existing law also requires the director to make reductions in other specified programs, including payments made to managed health care plans. This bill would eliminate the above reductions with respect to Medi-Cal program services for dates of service commencing 14 days after the effective date of the bill and ending on January 1, 2007, to the extent that federal financial participation is available for the increase provided for in these provisions. The bill would exempt from elimination the reduction in payments to managed health care plans.

Status:

Chaptered by Secretary of State. Chapter 8, Statutes of 2006.

• SB 1233 (Perata): Medi-Cal: Prescription Drug Benefit

Existing law requires the Department of Health Services, beginning on January 12, 2006, to provide drug benefits to a Medicare-eligible person who is also eligible for Medi-Cal prescription drug benefits and who is not able to obtain drug benfits from his or her prescription drug plan under the Medicare Program through February 15, 2006. This would allow the Governor, after that date, and upon notice to the Joint Legislative Budget Committee, to extend coverage for those drug benefits for coverage periods of up to 30 days each, but in no event beyond May 16, 2006.

Status:

Chaptered by Secretary of State. Chapter 7, Statutes of 2006.

• SB 1755 (Chesbro): Medi-Cal: Adult Day Health Care Services

The California Adult Day Health Care Act provides for the licensure and regulation of adult day health centers, with administrative responsibility for this program shared between the Department of Health Services (DHS) and the California Department of Aging pursuant to an interagency agreement. The Adult Day Health Medi-Cal Law establishes adult day health care services as a Medi-Cal benefit for Medi-Cal beneficiaries who meet certain criteria. Under existing law, participation in an adult day health care program requires prior authorization by DHS. This bill would revise the eligibility criteria for adult day health care services and would allow initial and subsequent treatment authorization requests to be granted for up to six calendar months. It would require that treatment authorization requests be initiated by the adult day health care center and include specified elements and that authorization or reauthorization of a treatment request be granted only if the participant meets certain medical necessity criteria. This bill would require adult day health centers to offer and provide directly on the premises, in accordance with the participant's individual plan of care, and subject to authorization, specified core services to each participant during each day of the participant's attendance at the center, including nursing services, personal care or social services, therapeutic activities, and one meal. Existing law requires the department to develop a rate methodology for adult day health care services and requires DHS to establish a reasonable rate for the initial assessment. This bill would require that the rate for the initial assessment be separately billable and that it take into account specified factors. It would require that subsequent assessments be billed at a lesser amount and that DHS establish utilization controls for assessment days to ensure the appropriate use of assessment and reassessment activity. This bill would require DHS, effective August 1, 2010, to establish a reimbursement methodology and a reimbursement limit for adult day health care services on a prospective cost basis for services that are provided to each participant, pursuant to his or her individual plan of care, as specified. The bill would require that these provisions be implemented only to the extent that federal financial participation is available and would require that federally qualified health centers be reimbursed on a prospective payment system rate basis pursuant to specified provisions of law for the provision of adult day health care services. The bill would require DHS to report annually to the relevant policy and fiscal committees of the Legislature, as part of the budget

submitted by the Governor to the Legislature each January, on the implementation of the changes described above to the adult day health care program, including the impact of those changes on the number of centers and participants.

Status: To enrollment.